

Classification

REPORTS INVENTORY

CONTROL NO.

PREPARE IN DUPLICATE

DD5/OC-021

1. TITLE OF REPORT (if a fill-in report include Form No.)

Office of Communications Ceiling and Strength Report

2. TYPE
OF
REPORT

<input checked="" type="checkbox"/>	STATISTICAL
<input type="checkbox"/>	NARRATIVE
<input type="checkbox"/>	MACHINE-NAME LISTING

3. FUNCTIONAL AREA

PERSONNEL

TRAINING

ADMIN. GENERAL

LOGISTICS

SECURITY

OTHER (specify)

MEDICAL

FINANCE

☒ COMMUNICATIONS

4. NO. OF COPIES PREPARED

Ten

5. FREQUENCY (weekly, monthly, quarterly, etc.)

Monthly

6. DISTRIBUTION (No. of components not
number of copies) D/CO, DD/CO
OC-O, OC-MS, OC-P, OC-A7. FORMAT (memorandum, form
computer print-out, etc)

Typed Stat. Report

8. ADP PROCESSING

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YES

IF YES GIVE ADP PROCESSING NO.

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NO

Job 209 A and B

9. DIRECTIVE AUTHORITY REQUIRING REPORT

Unknown

10. PREPARING COMPONENT (include lowest level
contributing information to report).

OC-A/PB

11. FEEDER REPORTS (State total number and identify by Title,
Form No., or nomenclature. Attach separate sheet if necessary.)

Two. Job 209 A and B

12. COST FACTORS

A. MANUAL PREPARATION AND REVIEW COSTS

GRADE	HOURLY RATE	<input checked="" type="checkbox"/>	HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/>	TIMES PREPARED	=	COST PER YEAR
GS-09/3	5.07		6		30.42		12		\$365.04
GS-05/1	3.15		4		12.60		12		\$151.20

B. COSTS OF COMPUTER PRODUCED REPORTS

<i>No card</i>			Unknown						
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/20

TOTAL COSTS PER YEAR

\$516.24

13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN,
INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.

The report is information regarding the Office of Communications current ceiling
and personnel on duty by organization, career service and location.